

CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE	COMMITTEE	LOBBYIST																				
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST FIORÉ LEONE																									
STREET ADDRESS 1364 W. 32ND ST.																									
CITY ERIE		STATE PA	ZIP CODE 16508-2418																						
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	DATE OF ELECTION																					
1. 6TH TUESDAY PRE-PRIMARY	Co. Council	3	DEM	MO.	DAY																				
2. 2ND FRIDAY PRE-PRIMARY				11	7																				
3. 30 DAY POST-PRIMARY				YEAR 2017																					
4. 6TH TUESDAY PRE-ELECTION																									
5. 2ND FRIDAY PRE-ELECTION																									
6. 30 DAY POST-ELECTION																									
ANNUAL REPORT	FOR OFFICE USE ONLY																								
<p>DATES OF REPORTING PERIOD</p> <table border="1"> <tr> <td>MO.</td> <td>DAY</td> <td>YEAR</td> <td>TO</td> <td>MO.</td> <td>DAY</td> <td>YEAR</td> </tr> <tr> <td>10</td> <td>23</td> <td>17</td> <td></td> <td>12</td> <td>31</td> <td>17</td> </tr> </table> <p>CASH BALANCE AT END OF REPORTING PERIOD: \$ 3017.31</p> <p>TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ — 0 —</p> <table border="1"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td>NO</td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td>NO</td> </tr> </table>						MO.	DAY	YEAR	TO	MO.	DAY	YEAR	10	23	17		12	31	17	AMENDMENT REPORT?	YES	NO	TERMINATION REPORT?	YES	NO
MO.	DAY	YEAR	TO	MO.	DAY	YEAR																			
10	23	17		12	31	17																			
AMENDMENT REPORT?	YES	NO																							
TERMINATION REPORT?	YES	NO																							

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS
23rd DAY OF **January**, **2018**

Fiore Leone
 SIGNATURE OF PERSON SUBMITTING REPORT
FIORÉ LEONE
 PRINTED NAME
814 864-6306
 AREA CODE DAYTIME TELEPHONE NUMBER

LANA B. WRIGHT, NOTARY PUBLIC
 ERIE, ERIE COUNTY, PA
 MY COMMISSION EXPIRES ON MARCH 19, 2018

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

I SWEAR (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS POLITICAL COMMITTEE HAS NOT VIOLATED ANY PROVISIONS OF THE ACT OF JUNE 3, 1937 (P.L. 1333, No. 320) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS
 _____ DAY OF _____, 20____

 SIGNATURE

MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR.

 SIGNATURE OF CANDIDATE

 PRINTED NAME

 AREA CODE

 DAYTIME TELEPHONE NUMBER

Department of State • Bureau of Commissions, Elections and Legislation
 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280